Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10-767-379

CLAIMS AS FILED - PART I								MALL E	NTITY		OTHER	
Γ _Τ /	OTAL CLAIMAC		(Columr	າ 1)	(Colu	(Column 2)		YPE [OR	SMALL	ENTITY
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	L	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II									<u> </u>	J -	OTHER	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	01.4144	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	<u></u>	OR	+290=	
· · · · · · · · · · · · · · · · · · ·										ا ا	TOTAL	
		Αľ	ODIT. FEE		JON ,	ADDIT. FEE						
		(Column 1) CLAIMS		(Colum		(Column 3)			ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL		L	TOTAL	— <u> </u>
								DIT. FEE L		OR	ADDIT. FEE	
_		(Column 1) CLAIMS	. 1	(Colum		(Column 3)	<u> </u>			_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	ï	OR	X\$18=	
	Independent	*	Minus	***		=		X43=	,	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								<u> </u>	OR	+290=	· .
**	** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DDIT. FEE	
1	he "High st Num	ber Previously Paid	For" (Total or	Independ 1	ress than nt) is the l	i 3, enter "3." highest number	found	in the appr	opriat box		•	